United States Bankruptcy Court

Debtor(s)

Middle District of Pennsylvania

Case No.

5:20-bk-00743

Chapter

AMENDMENT COVER SHEET

Amendment(s) to the following petition, list(s), schedule(s) or statement(s) are transmitted herewith: Schedules I and J

NOTICE OF AMENDMENT(S) TO AFFECTED PARTIES

Pursuant to Federal Rule of Bankruptcy Procedure 1009(a), I certify that notice of the filing of the amendment(s) listed above has been given this date to any and all entities affected by the amendment as follows:

In re Glen Paul Younker

Joseph R. Baranko, Jr., Esquire

Attorney for Debtor(s)

Slusser Law Firm

1620 North Church Street

Suite 1

Hazleton, PA 18202

(570) 453-0463 Fax:(570) 453-0273

joeb@slusserlawfirm.com

United States Bankruptcy Court Middle District of Pennsylvania

In re	Glen Paul Younker	Case No.	5:20-bk-00743		
	,—,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Debtor(s)	Chapter	13	

AMENDED DECLARATION CONCERNING DEBTOR'S SCHEDULES

	DECLARATION CONCER	MING DEDIOR S SCHEDULES
	DECLARATION UNDER PENALTY	OF PERJURY BY INDIVIDUAL DEBTOR
	I declare under penalty of perjury that I have of page(s), and that they are true and correct to	read the foregoing Schedules I and J, consisting the best of my knowledge, information, and belief.
Date _	8-13-2020 Signature	Glen Paul Younker Debtor
Pen	alty for making a false statement or concealing property	Fine of up to \$500,000 or imprisonment for up to 5 years or bot

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.

18 U.S.C. §§ 152 and 3571.

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Be as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filling jointly, and your spouse is living with you, include information about your spouse, it more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question Part 1:	Fill	in this information to identify your c	ase:								
United States Bankruptcy Court for the: MIDDLE DISTRICT OF PENNSYLVANIA Case number 5:20-bk-00743 Check if this is: An amended filing A supplement showing postpetition chapter 13 income as of the following date: MI/DD/YYYY 12/1 Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for applying correct information. If you are separated and your spouse is not filing with you, do not include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question Part 1: Describe Employment If you have more than one job, attach a separate gage with information about additional employers. Debtor 1 Debtor 2 or non-filling spouse Employer's address Cocupation may include student or homemaker, if it applies. Employer's address Cocupation may include student or homemaker, if it applies. Employer's address Cocupation may include student or homemaker, if it applies. Employer's address Cocupation may include student or homemaker, if it applies. Employer's address Cocupation may include student or homemaker, if it applies. Employer's address Cocupation may include student or homemaker, if it applies. Employer's address Cocupation morthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filling spouse unless you are separated. If you or your mon-filling spouse have more than one employer, combine the information for all employers for that person on the lines below. If you non-filling spouse, attach a separate sheet to this form. For Debtor 1 For Debtor 2 List monthly gross wages, salary, and commissions (before all payroli deductions). If not paid monthly, calculate what the monthly wage would be. Substantial co	Deb	otor 1 Glen Paul Y	ounker								
Case number 61:20-bk-00743 Check if this is:											
Official Form 106I Schedule I: Your Income 12/1 Be as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filling jointly, and your spouse is living with you, include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question Part 1: Describe Employment I. Fill In your employment Information. If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. How long employed there? Fart 2: Give Details About Monthly Income Stitumate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. You or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need none space, attach a separate sheet to this form. For Debtor 1 For Debtor 1 For Debtor 2 N/A Schief For Debtor 2 N/A Schief For Debtor 3 SN/A	Uni	ted States Bankruptcy Court for the	: MIDDLE DISTRICT O	F PENNSYLVANIA		-Van					
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List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2 \$ 0.00 \$ N/A 3. Estimate and list monthly overtime pay. 3 +\$ 0.00 +\$ N/A	spou If you	se unless you are separated. I or your non-filing spouse have mo	ore than one employer, co						•	J	
2 deductions). If not paid monthly, calculate what the monthly wage would be 2 \$ 0.00 \$ N/A 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A						Fo	or Debtor 1				
	2.				2.	\$	0.00	\$	N/A		
	3.	Estimate and list monthly overti	me pay.		3.	+\$	0.00	+\$	N/A		
4. Calculate gross Income. Add line 2 + line 3. 4. \$ 0.00 \$ N/A	4.	Calculate gross Income. Add lin	e 2 + line 3.		4.	\$	0.00	\$	N/A		

_			
e.	12.	\$	6,087.49
		Com	bined hly income

٠.	DO YOU	a expect an increase or decrease within the year after you file this form?	
		No.	

NO.	
Yes. Explain:	

Fitt	l in this informa	tion to identify y	our case:							
	btor 1	Glen Paul Ye				C	heck	if this is:		
						i		n amended filing		
	btor 2								wing postpetition ch	apter
(Sp	ouse, if filing)						1	3 expenses as of	the following date:	
Uni	ited States Bankri	uptcy Court for the	MIDDLI	E DISTRICT OF PENNSY	LVANIA		٨	MM / DD / YYYY		
	se number 5:2	20-bk-00743								
-	fficial Fo									
		J: Your								12/15
nui	ormation. If momber (if known	ore space is ne n). Answer evel ibe Your House	eded, atta ry question	If two married people a ch another sheet to this n.	e filing together, both form. On the top of a	n are e	equal	ly responsible for all pages, write y	or supplying corre	ct se
1.	ls this a join	t case?								
	■ No. Go to □ Yes. Does		in a senar	ate household?						
	_ 100: D00:		iii a sopaii	ate nousenoid:						
			st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate Househo	old of D	ebto	r 2.		
2.	Do you have	dependents?	■ No							
	Do not list De Debtor 2.	btor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2	ship to		Dependent's age	Does dependent live with you?	
	Do not state t	he				HETOTAL CHI	SOUTH		□ No	
	dependents r	ames.							☐ Yes	
									□ No	
									☐ Yes	
									□ No	
									☐ Yes	
									□ No	
									☐ Yes	
3.	expenses of	enses include people other th	han \square	No Yes						
	yourself and	your depender	nts?	103						
Par		te Your Ongoir	ng Monthly	y Expenses						
exp	imate your exp enses as of a blicable date.	penses as of you date after the b	our bankru pankruptcy	ptcy filing date unless y is filed. If this is a supp	ou are using this forn lemental S <i>chedule J</i> ,	n as a check	supp the	plement in a Cha box at the top of	pter 13 case to rep f the form and fill in	ort n the
Incl	lide expenses	naid for with -	non-caeb c	government assistance it	You know					
the	value of such ficial Form 106	assistance and	d have incl	luded it on <i>Schedule I:</i> Y	our Income			Your expe	enses	
•		•				500	90 SXI	ATTOCKED HER PERSONNEL	THE RESERVE OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAME	
4.	The rental or payments and	home ownersh any rent for the	nip expens ground or	ses for your residence. Ir · lot.	clude first mortgage	4.	\$		1,243.53	
	If not include	d in line 4:								
		tate taxes				4a.	\$		0.00	
	4b. Propert	y, homeowner's	, or renter's	s insurance		4b.	\$		0.00	
				pkeep expenses		4c.	\$		170.00	
_		wner's associati				4d.			0.00	
5.	Additional m	ortgage payme	nts for vo	ur residence, such as hor	ne equity loans	5.	\$		0.00	

Official Form 106J

Schedule J: Your Expenses

page 1

Del	otor 1	Glen Pa	ul Younker	Case nur	nber (if known)	5:20-bk-00743
6.	Utilit	ties:				
	6a.		y, heat, natural gas	6a	\$	455.00
	6b.	Water, se	ewer, garbage collection	6b	. \$	50.00
	6c.	Telephor	e, cell phone, Internet, satellite, and cable services	6c	. \$	262.94
	6d.	Other, Sp	pecify: House phone	6d	. \$	40.00
7.	Food		sekeeping supplies	7	\$	945.00
8.			children's education costs	8		0.00
9.	Cloth	hing, laun	dry, and dry cleaning	9		80.00
10.		•	products and services	10		110.00
11.			ental expenses	11		145.00
			i. Include gas, maintenance, bus or train fare.		Ψ	145.00
			car payments.	12.	\$	325.00
13.			clubs, recreation, newspapers, magazines, and books	13.	\$	90.00
			tributions and religious donations	14		20.00
		rance.		• • •	*	20.00
			nsurance deducted from your pay or included in lines 4 or 20.			
		Life insur		15a	\$	0.00
	15b.	Health in:	surance	15b.	\$	0.00
	15c.	Vehicle in	surance	15c		163.00
	15d.	Other ins	urance. Specify: Harley Davidson Insurance	15d.		60.00
16	Taye	s Do not i	nclude taxes deducted from your pay or included in lines 4 or 20.	, 00	Ψ	80.00
	Spec		notice taxes deducted from your pay or included in lines 4 of 20,	16.	\$	0.00
17.	Insta	Ilment or	lease payments:			0.00
	17a.	Car paym	ents for Vehicle 1	17a.	\$	0.00
	17b.	Car paym	ents for Vehicle 2	17b.	\$	769.08
	17c.	Other, Sp	ecify:	17c.	\$	0.00
	17d.	Other. Sp	ecify:	17d.		0.00
18.			s of alimony, maintenance, and support that you did not repor		-	0.00
	dedu	cted from	your pay on line 5, Schedule I, Your Income (Official Form 10	6I). 18.	\$	0.00
19.	Othe	r payment	s you make to support others who do not live with you.	/-	\$	0.00
	Speci		•	19.		0.00
20.	Othe	r real prop	erty expenses not included in lines 4 or 5 of this form or on S	Schedule I: Yo	our Income.	
	20a.	Mortgage	s on other property	20a.		0.00
	20b.	Real esta	te taxes	20b.	\$	0.00
	20c.	Property.	homeowner's, or renter's insurance	20c.		0.00
			nce, repair, and upkeep expenses	20d.		0.00
		4	ner's association or condominium dues	20e.		0.00
21		r: Specify:	Sears appliance warranty/computer payments		+\$	
	Othic	ri opcony.	Sears appliance warranty/computer payments		Τψ	110.00
22.	Calcu	ulate your	monthly expenses			
	22a. A	Add lines 4	through 21.		\$	5,038.55
	22b. (Copy line 2	2 (monthly expenses for Debtor 2), if any, from Official Form 106J	l - 2	\$	
	22c. /	Add line 22	a and 22b. The result is your monthly expenses.		\$	5,038.55
						5,030.33
23.			monthly net income.			
			12 (your combined monthly income) from Schedule I.	23a.	\$	6,087.49
	23b.	Copy you	r monthly expenses from line 22c above.	23b.	-\$	5,038.55
	00		4.1			
	23c.	Subtract y	our monthly expenses from your monthly income,	22.	œ.	1 048 04
	•	the result	is your monthly net income.	23c.	\$	1,048.94
24.	For ex-	cample, do yo cation to the	an increase or decrease in your expenses within the year afte ou expect to finish paying for your car loan within the year or do you expect terms of your mortgage?	r you file this your mortgage	form? payment to increa	ise or decrease because of a
	■ No		Percentage 1			
	☐ Ye	es.	Explain here:			